	PATENT	APPLICATI Effec	)	1	() ~	79	75	13	" ラ ラ					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTI	TY	OR	OTHE		
TOTAL CLAIMS			32					RATE	T	FEE	<b>7</b>	RATE	_	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 3	85.00	OR	BASIC FE	1	70.00
TOTAL CHARGEABLE CLAIMS			3/ minus 20=		•	17		X\$ 9=	0	19	OR	X\$18=	1	
INDEPENDENT CLAIMS			) minus 3 =		1	/ :		X43=	1	.2	1	X86=	十	
M	JLTIPLE DEPE	NDENT CLAIM F	RESENT						+-	2	OR	7.00=	╁	
• 1	the difference		+145=	4_		OR	+290=	L						
* If the difference in column 1 is less than zero, enter "0" in column 2									- اح	Y	OR	TOTAL	L	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							· ·_	OTHER THE SMALL ENTITY OR SMALL ENT						
AMENDMENT A	Ton	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	TIC	ODI- ONAL EE		RATE	TI	DDI- DNAL FEE
	Total	. 24	Minus	-37		= 0		X\$ 9=	T	Ī	OR	X\$18=	П	
	Independent	· <u>'</u>	Minus	4	7.	- 0	-	X43=	1		OR	X86=	П	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=			OR	+290=	П	
									+			TOTAL	H	,
		A	DDIT. FEI	<u> </u>	<del></del>		ADDIT. FEE							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	TIO	DI- NAL		RATE	TIC	DDI- DNAL
	Total	•	Minus	** .			ſ	X\$ 9=	1:		OR	X\$18=	Ť	
	Independent	*	Minus	***		=	T	X43=	1		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										•	OR	+290=		
TOTAL ADDIT, FEE											OR A	TOTAL DDIT. FEE		
(Column 1) (Column 2) (Column 3)													-	
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE: NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE	ADI TION FE	JAL		RATE	TIC	DDI- NAL EE
	Total	•	Minus	••			r	X\$ 9=			OR T	X\$18=	<del>-</del> -	
	Independent	•	Minus	***		=	-	X43=		一				
`	FIRȘT PRESE	A43=			OR	X86=								
• 14	the entry in color	nn 1 is lose than it.		مه دنسر ۲ مم	<b>V</b> in		L.	+145=			OR	+290=		]
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20; enter "20.  **ADDIT. FEE											OR A	TOTAL DOTT. FEE	·	
		ber Previously Paid							propria	te box				

Application or Docket Number